

AMENDED MONTANA INDIVIDUAL INCOME TAX RETURN 19

FORM 2X
Rev. 8-97

Fiscal Year Beginning 19 and Ending 19

If Fiduciary Return Check Box ☐

Attach copy of Original Return

Last Name	Your First Name & Middle Initial	Your Social Security No.
Spouse's Last Name if different	Spouse's First Name & Middle Initial	Spouse's Social Security No.
Address	City	State Zip Code +4

Notice: See back for special Instructions for tax year 1994

PLEASE EXPLAIN THE CHANGES ON THE BACK OF THIS FORM

Filing Status Check One	1 Single <input type="checkbox"/>	2 Married filing joint return <input type="checkbox"/>	3 Married and both filing separate returns on this form <input type="checkbox"/>	4 Married and both filing separate returns on separate forms <input type="checkbox"/>	5 Married filing separate return and spouse is not filing <input type="checkbox"/>	6 Head of Household <input type="checkbox"/>
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INCOME AND DEDUCTIONS

AS FILED

NET CHANGE

AS AMENDED

	COLUMN A for yourself, joint separate or single	COLUMN B (spouse)	COLUMN A Increase or Decrease	COLUMN B Increase or Decrease	COLUMN A for yourself, joint separate or single	COLUMN B (spouse)
1. Federal Adjusted Gross Income						
2. Additions to income						
3. Reduction of income	()	()			()	()
4. Montana adjusted gross income (1+2-3)						
5. Deductions—(itemized or standard)						
6. Subtract line 5 from 4						
7. Enter exemption deduction						
8. Taxable income (subtract line 7 from line 6)						
TAX LIABILITY						
9. Tax liability from tax table						
10. Surtax *See back						
11. Tax on lump sum distribution						
12. Subtotal, add lines 9, 10 and 11						
13. Allowable credits						
14. Subtotal, subtract line 13 from line 12						
15. Investment credit recapture from Form RIC						
16. Old Fund Liability Tax						
17. Total tax, add lines 14, 15 and 16						
18. Public Campaign Fund (only applicable for years prior to 1993)						
19. Contributions to other programs (list)						
20. Total of lines 17, 18 and 19						
21. Combine amounts on line 20 columns A & B						
22. Montana tax withheld						
23. Payments and credits on Estimated Tax						
24. Elderly Homeowner/Renter Credit from Form 2EC						
25. Total of lines 22 through 24						
26. Combine amounts on line 25, columns A & B						
27. Amount paid with original return, plus additional tax paid after it was filed						
28. Total of line 27 plus line 26 as amended						
REFUND OR BALANCE DUE						
29. Total refund(s) received for year amending						
30. Subtract line 29 from line 28 and enter result						
31. REFUND to be received. If line 30 is more than line 21, enter the difference					REFUND	
32. Amount of line 31 to be credited to 19 estimated tax						
33. TAX DUE. If line 30 is less than line 21, enter difference. Please pay in full					TAX DUE	
34. Interest computed on amount shown on line 33						
35. BALANCE DUE, add line 33 and 34. Please pay in full					BALANCE DUE	

Make checks payable to the Department of Revenue

For TAX DUE Mail to:
Income Tax Division
Montana Department of Revenue
PO Box 6308
Helena, MT 59604-6308

For REFUND Mail to:
Income Tax Division
Montana Department of Revenue
PO Box 6577
Helena, MT 59604-6577

Name, Address, and Telephone Number of Preparer

Post dated checks will be returned

I, the undersigned, declare under the penalties of false swearing, that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief it is a true, correct, and complete return made in good faith.

Your Signature

Date

(Daytime) Telephone Number

Signature of Spouse

Date

Note: If your original 1994 return was timely filed, the Department may make an adjustment to recalculate the Excess Tax Refund.